C-2 Rev. 7/97

## CAMPAIGN FINANCIAL DISCLOSURE REPORT

	SUMMARY PAGE		
	(Please Print or Type)		
Section I	200.		
Name of Candidate or Political Committee and Chairperson	JAS,	Office Sought (if candidate)	District (if any)
Senator Laint Noh			
Mailing Address	City and Zip	Home Phone	Work Phone
Porte Poute 1	Kimberly 8354	50733-3617	733-3617
Name of Political Treasurer  Elaine Phillips	JE Of Day Par		
Mailing Address		Home Phone	Work Phone
PO Boy 3296	Ketchum 83340	726-4060	725-2055
Section II	TYPE OF REPORT		
Directions: To indicate the type of report being filed, instructional manual for reporting periods and due da  This report is for the period from	, fill in the appropriate dates and tes.		• •

Porte Poute 1	Kimberly	835450733-30	617 733-3617		
Name of Political Treasurer  Elaine Phillips	15 Ck 10	Taka			
Mailing Address ☐ Check if address cha	inge. City and Zip	Home Phone	Work Phone		
PO Boy 3296	Ketchum	83340 726.40			
Section II	/ce/chum	5-70 744-76	123-40-5		
	TYPE OF REPO				
Directions: To indicate the type of report being instructional manual for reporting periods and di	filed, fill in the appropriate	dates and check the appro	priate box(es). See the		
This report is for the period from	om <u>0/1 0/1 0</u>	<u>/ 3</u> through <u>/ と /</u>	3/103		
☐ 7 Day Pre-Primary Report	☐ 7 Day Pre-General Re		ril 30) llot measure committees)		
☐ 30 Day Post-Primary Report	☐ 30 Day Post-General I				
		☐ Quarterly (Jul			
☐ October 10 Pre-General Report	☐ Annual Report	(only filed by ba	llot measure committees)		
Is this Report an amendment?	Yes □ No	Is this a Termination Repo	ort?		
Section III STATEMENT	OF NO CONTRIBUTIO	NS OR EXPENDITURES	3		
Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.    If you had no contributions are carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.    If you had no contributions or expenditures during the statement below, fill in the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.    If you had no contributions or expenditures during the statement below, fill in the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.    If you had no contributions or expenditures during the statement below, fill in the appropriate "Calendar Year to Date" figures in Column II, Section IV.    If you had no contributions or expenditures during the statement below, fill in the appropriate "Calendar Year to Date" figures in Column II, Section IV.					
Section IV			·		
To reach your Calendar Year to Date figure: Ad	SUMMARY d this report's Column I	COLUMN I	COLUMN II		
figures to the Column II figures of your previous		This Period	Calendar Year to Date		
Line 1: Cash on Hand January 1, This Year*		\$ XXXXXX	\$ 2077.71		
Line 2: Enter Cash Balance at Close of Last Reporting Period**		\$ 2077.71	\$ XXXXXX		
Line 3: Total Contributions (Enter amount from page 2)		\$	\$ <u> </u>		
Line 4: Subtotal (Add lines 1, 2 and 3)		\$	\$		
Line 5: Total Expenditures (Enter amount from page 2)		\$	\$		
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**		\$ <u>2077.71</u>	\$		
*This same figure should be entered on line 1 of all reports filed this calendar year.  **You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.  Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.					

ction V CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES				
Contributions Pledged duri	ng this reporting period but not yet received:	None	□\$	(see attached Schedule C-2A)
Incurred Expenditures dur	ing this reporting period but not yet paid:	None	□\$	(see attached Schedule C-2B)

Return This Report To: Pete T. Cenarrusa Secretary of State PO Box 83720 Boise ID 83720-0080 fax: (208) 334-2282

Section V	CERTIFICATION
	I Elane of Political Treasurer), hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as
	required by law.  Saine Phellipse
	Signature of Political Treasurer